## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

|   | MENT # P9500<br>SN Name<br>ELECTRIC, INC.  | 0057591 (6)  |  |  | ANN MACCONA HAA NA RA             |
|---|--|--|--|--|-----------------------------------|
| Principal Plac                            | ce of Business   | Mailing Address  |  | - I KOBILLODA ING KOMUL OMIK ODIN ODIK DOKU 9660   | BUTH LEDEN BUILD ICADA UNIT (88)  |
| 10631 N.W. 26TH PLACE<br>SUMRISE FL 33322 |  | 10631 N.W. 26TH PLACE<br>SUNRISE FL 33322                                |  | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  07/24/1995                          |                                   |
| 2 Principal P                             | Place of Business  | 2a. Mailing Address  |  | 4. FEI Number  | Applied For                       |
| 21  | 1400 01 20311033   | 26   |  | 65-0598560   | Not Applicable                    |
| Suite, Apt.                               | #, e/C.  | Suite, Apt. #, etc.  | ***                                    | 5. Certificate of Status Desired   | \$8.75 Additional<br>Fee Required |
| City & Stat                               | le   | City & State   |  | 6. Election Campaign Financing   | \$5.00 May Be                     |
| 23  |  | 28   |  | Trust Fund Contribution  | Added to Fees                     |
| Zip                                       | Country  | Zip  | Country                                | 8. This corporation owes or has paid the   |                                   |
| 24  | 25<br>9. Name and Address of Curre   |  | 90                                     | Personal Property Tax due June 30.  10. Name and Address of New Register                           | Yes No                            |
| 100<br>SU                                 | NG, RUSSELL B31 N.W. 26TH PLACE NRISE FL 33322  to the provisions of Sections 607.05 | .02 and 607,1508, Florida Statutes                                       | 83 City                                |  | 85 Zip Code                       |
| office or r<br>agent. I a<br>SIGNATURE    | registered agent, or both, in the Sta<br>im familiar with, and accept the obli       | te of Florida, Such change was au<br>galions of, Section 607.0505, Flori | thorized by the corpor<br>da Statutes. | rporation submits this statement for the purpos<br>ation's board of directors. I hereby accept the | appointment as registered         |
|   | Signature, typod or printed name of trepstered a                                     |  | Registered Agent signature req         |  |                                   |
| 12.                                       | DPC OFFICERS A   | ND DIRECTORS   | 13.                                    | ADDITIONS/CHANGES TO OFFICERS /  | Change Addition                   |
| NAME                                      | LONG, RUSSELL  | occ.,c   | 12 NAME                                |  | energy reducted                   |
| STREET ADDRESS                            | 10621 NW 26TH PLACE  |  | 1.3 STREET ADDRESS                     |  |                                   |
| CITY-ST-ZIP                               | SUNRISE FL   |  | 1.4 CITY-ST-ZIP                        |  |                                   |
| TITLE                                     |  | DELETE   | 2.1 TITLE                              |  | ☐ Change ☐ Addition               |
| NAME                                      |  |  | 22 NAME                                |  |                                   |
| STREET ADDRESS                            |  |  | 2.3 STREET ADDRESS                     |  |                                   |
| CITY-ST-ZIP                               |  | T person   | 2.4 CITY-ST-ZIP                        |  |                                   |
| TITLE                                     |  | DELETE   | 3.1 TIFLE                              |  | Change Addition                   |
| NAME<br>CONCER + DODGGG                   |  |  | 3.2 NAME                               |  |                                   |
| STREET ADDRESS                            |  |  | 3.3 STREET ADDRESS                     |  |                                   |
| CITY-ST-ZIP<br>TITLE                      | <b></b>  | ☐ DELETE   | 3.4 CITY-ST-ZIP 4 TITLE                |  | Change Addition                   |
| NAME<br>STREET ADDRESS                    |  |  | 4 NAME<br>4 STREET ADDRESS             |  | And the second                    |
| CFTY-ST-ZIP                               |  | DELETE   | 4. CITY-ST-ZIP<br>5. TITLE             |  | Change Addition                   |
| HILLE                                     |  |  | ■ AE HILE                              |  | C Outside C Vocation              |

6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or our anti-furnity with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

**SIGNATURE:** 

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

**FILED** 

Apr 14 1998 8:00am

Secretary of State